

# Major Donor and Independent Expenditure Committee Campaign Statement

(Government Code Sections 84200-84216.5)

MAJOR DONOR AND INDEPENDENT EXPENDITURE  
COMMITTEE STATEMENT

Type or print in ink.

☐ Amendment

SEE INSTRUCTIONS ON REVERSE

<b>Statement covers period</b> from <u>07/01/2017</u> through <u>12/31/2017</u>	<b>Date of election if applicable:</b> (Month, Day, Year) _____	Date Stamp	<b>CALIFORNIA FORM 461</b>
			1/4
			For Official Use Only

## 1. Name and Address Of Filer

### NAME OF FILER

(Include name(s) of all affiliated entities whose contributions are included in this statement.)  
Liberty Dental Plan of California, Inc.

MAILING ADDRESS (NO. AND STREET)

CITY STATE ZIP CODE

Irvine CA 92602  
RESPONSIBLE OFFICER (If filer is other than an individual) AREA CODE/DAYTIME PHONE

## 2. Nature and Interests of Filer (Complete each applicable section.)

☐ A FILER THAT IS AN INDIVIDUAL MUST LIST THE NAME, ADDRESS, AND BUSINESS INTERESTS OF EMPLOYER OR, IF SELF-EMPLOYED, THE NAME, ADDRESS, AND NATURE OF THE BUSINESS

NAME OF EMPLOYER/BUSINESS BUSINESS INTERESTS

ADDRESS OF EMPLOYER/BUSINESS

☒ A FILER THAT IS A BUSINESS ENTITY MUST DESCRIBE THE BUSINESS ACTIVITY IN WHICH IT IS ENGAGED

Health

☐ A FILER THAT IS AN ASSOCIATION MUST PROVIDE A SPECIFIC DESCRIPTION OF ITS INTERESTS

☐ A FILER THAT IS NOT AN INDIVIDUAL, BUSINESS ENTITY, OR ASSOCIATION MUST DESCRIBE THE COMMON ECONOMIC INTEREST OF THE GROUP OR ENTITY

## 3. Summary

(Amounts may be rounded to whole dollars.)

- Expenditures and contributions (including loans) of \$100 or more made this period. (Part 5.) ..... \$ 33700.00
- Unitemized expenditures and contributions (including loans) under \$100 made this period..... \$ 0.00
- Total expenditures and contributions made this period. (Add Lines 1 + 2.) ..... **SUBTOTAL** \$ 33700.00
- Total expenditures and contributions made from prior statement. (Enter amount from Line 5 of last statement filed. If this is the first statement for the calendar year, enter zero.) ..... \$ 30000.00
- Total expenditures and contributions (including loans) made since January 1 of the current calendar year. (Add Lines 3 + 4.).....**TOTAL** \$ 63700.00

## 4. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 01/30/2018 By Laura Ann Stephen 300200  
DATE SIGNATURE OF INDIVIDUAL DONOR OR RESPONSIBLE OFFICER IF OTHER THAN AN INDIVIDUAL

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INDEPENDENT EXPENDITURE COMMITTEE AND  
MAJOR DONOR COMMITTEE STATEMENT

Statement covers period from <u>07/01/2017</u>	<b>CALIFORNIA FORM 461</b>
through <u>12/31/2017</u>	
2/4	

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NAME OF FILER

Liberty Dental Plan of California, Inc.

## 5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made

(If more space is needed, use additional copies of this page for continuation sheets.)

DATE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATIVE TO THIS CANDIDATE, MEASURE, OR COMMITTEE
12/21/2017	Joaquin Arambula for Assembly 2018  Sacramento CA 95815 ID: 1393111 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Joaquin Arambula State Assembly Person Assembly District NO: 31 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	1500.00	Calendar Year \$ 1500.00 Other \$
12/14/2017	California Democratic Party  Sacramento CA 95811 ID: 741666 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		California Democratic Party NO: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	10000.00	Calendar Year \$ 10000.00 Other \$
12/21/2017	California Republican Party  Sacramento CA 95814 ID: 810163 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		California Republican Party NO: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	5000.00	Calendar Year \$ 5000.00 Other \$
12/21/2017	Ken Cooley for Assembly 2018  Sacramento CA 95814 ID: 1393555 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Ken Cooley State Assembly Person Assembly District NO: 08 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	1500.00	Calendar Year \$ 1500.00 Other \$
<b>SUBTOTAL \$</b>						

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12/21/2017	Jim Cooper for Assembly 2018  Sacramento CA 95814 ID: 1392388 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Jim Cooper State Assembly Person Assembly District NO: 09 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	2500.00	Calendar Year \$ <u>2500.00</u> Other \$ _____
12/21/2017	Heath Flora for Assembly 2018  Hilmar CA 95324 ID: 1392690 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Heath Flora State Assembly Person Assembly District NO: 12 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	1500.00	Calendar Year \$ <u>1500.00</u> Other \$ _____
12/19/2017	Brian Maienschein for Assembly 2018  La Mesa CA 91942 ID: 1392735 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Brian Maienschein State Assembly Person Assembly District NO: 77 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	1500.00	Calendar Year \$ <u>1500.00</u> Other \$ _____
12/21/2017	Kevin McCarty for Assembly 2018  Sacramento CA 95864 ID: 1392804 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Kevin McCarty State Assembly Person Assembly District NO: 07 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	1500.00	Calendar Year \$ <u>1500.00</u> Other \$ _____
<b>SUBTOTAL \$</b>						

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12/21/2017	Richard Pan for Senate 2018  Sacramento CA 95815 ID: 1374058 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Richard Pan State Senator Senate District  NO: 06 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	2500.00	Calendar Year \$ <u>2500.00</u> Other \$ _____
12/14/2017	Anthony Rendon for Assembly 2018  Long Beach CA 90807 ID: 1393414 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Anthony Rendon State Assembly Person Assembly District  NO: 63 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	4200.00	Calendar Year \$ <u>4200.00</u> Other \$ _____
12/14/2017	Phil Ting for Assembly 2018  Sacramento CA 95841 ID: 1393484 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Phil Ting State Assembly Person Assembly District  NO: 19 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	2000.00	Calendar Year \$ <u>2000.00</u> Other \$ _____

SUBTOTAL \$ 33700.00

FPPC Form 461 (8/99)  
For Technical Assistance: 916/322-5660